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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Υοι	ır full name		
	you pict exa lice Brin ider	te the name that is on r government-issued ure identification (for mple, your driver's nse or passport). In gyour picture of the properties of the properti	Roberta First name Ann Middle name Lausch Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Incl	other names you have ed in the last 8 years ude your married or den names.		
3.	you nun Indi	ly the last 4 digits of Ir Social Security nber or federal ividual Taxpayer ntification number N)	xxx-xx-6826	

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Debtor 1 Roberta Ann Lausch

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		438 River Street Wilmington, IL 60481				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Will				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Roberta Ann Lausch

ar	Tell the Court About	Your E	Bankruptcy Ca	se				
7. The chapter of the Bankruptcy Code you are choosing to file under Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § (Form 2010)). Also, go to the top of page 1 and check the appropriate box.			ruptcy					
	choosing to file under	Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are paying the fee y	ck with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, on alf, your attorney may pay with a credit card or ch	or money	
					stallments. If you choose this opt of the thin t	on, sign and attach the Application for Individuals	to Pay	
			I request that but is not req applies to you	t my fee be w uired to, waive ur family size a	aived (You may request this optic your fee, and may do so only if y and you are unable to pay the fee	on only if you are filing for Chapter 7. By law, a jud our income is less than 150% of the official povert in installments). If you choose this option, you mu	ty line that	
			the Application	on to Have the	Chapter 7 Filing Fee Waived (Off	cial Form 103B) and file it with your petition.		
Э.	Have you filed for bankruptcy within the	■ N	0.					
	last 8 years?	ΠY	es.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ N	0					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ПΥ	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.				
		ПΥ	es. Has yo	ur landlord obt	tained an eviction judgment again	st you and do you want to stay in your residence?	•	
				No. Go to line	: 12.			
				Yes. Fill out II bankruptcy pe		Judgment Against You (Form 101A) and file it wit	th this	

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Document Page 4 of 50 Case number (if known) Debtor 1 Roberta Ann Lausch Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Roberta Ann Lausch

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Roberta Ann Lau	sch	Document		Case number (if know	vn)
Part	6: Answer These Ques	tions for Repo	rting Purposes			
16.	What kind of debts do you have?					11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
					•	
			No. Go to line 16c.			
		16c. Sta	ate the type of debts you owe tha	it are not consumer deb	ots or business debts	
17.	Are you filing under Chapter 7?	□ No. la	m not filing under Chapter 7. Go	to line 18.		
	after any exempt property is excluded and	are	e paid that funds will be available	estimate that after any to distribute to unsecu	exempt property is ored creditors?	excluded and administrative expenses
	are paid that funds will			□ 1,000-5,000 □ 25,001-50,000 □ 5001 10 000		
Part 6: Answer These Questions for Reporting Purposes						
18.		■ 1-49		1 ,000-5,000		25,001-50,000
	-			·		
				□ 10,001-25,000	L	More than 100,000
19.		□ \$0 - \$50,0	000	□ \$1,000,001 - \$10 m	illion [☐ \$500,000,001 - \$1 billion
	estimate your assets to					\$1,000,000,001 - \$10 billion
20.		□ \$0 - \$50,0	000	□ \$1,000,001 - \$10 m	illion [☐ \$500,000,001 - \$1 billion
						3 \$1,000,000,001 - \$10 billion
Part	7: Sign Below					
For	you	I have exami	ned this petition, and I declare ur	nder penalty of perjury	that the information p	provided is true and correct.
						orney to help me fill out this
		I request reli	ef in accordance with the chapter	of title 11, United State	es Code, specified in	this petition.
		bankruptcy of and 3571.	ase can result in fines up to \$250			
				Signa	ture of Debtor 2	
				S.g.ia	5 C. 2 CO. C. 2	
		Executed on	April 26, 2016	Execu	ited on	
					MM / DD /	YYYY

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Debtor 1 Roberta Ann Lausch Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christina Banyon	Date	April 26, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Christina Banyon		
Printed name		
Banyon & Scheinbaum, LLC		
Firm name		
3077 West Jefferson Street		
Suite 107		
Joliet, IL 60435		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	cbanyon.law@gmail.com
6283282		
Bar number & State		

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		THE FAUL O ULSU	
mation to identify your	case:		
Roberta Ann Lau	sch		
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Roberta Ann Laus First Name	Roberta Ann Lausch First Name Middle Name First Name Middle Name	Roberta Ann Lausch First Name Middle Name Last Name First Name Middle Name Last Name

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

-			
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	68,077.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,131.59
	1c. Copy line 63, Total of all property on Schedule A/B	\$	70,208.59
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	56,235.71
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	25,075.77
	Your total liabilities	\$	81,311.48
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,872.04
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,005.15
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersonal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Page 9 of 50 Case number (if known) Debtor 1 Roberta Ann Lausch

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	١.
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	9

2,266.66

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Ca	se 16-1418	5 Doc 1		04/26/16 ument	Entered 04/26 Page 10 of 50	/16 15:21:57	Des	sc N	Main	
Fill	in this inform	nation to identify	your case and t			1 800, 10 01 50					
Deb	otor 1	Roberta Ani		le Name		Last Name					
	otor 2 ouse, if filing)	First Name	Midd	le Name		Last Name					
Uni	ted States Bar	nkruptcy Court for	r the: NORTHER	RN DIST	RICT OF ILLI	NOIS					
Cas	se number					_				Check if this is an amended filing	
Эf	ficial Fo	rm 106A/E	3								
Sc	chedule	A/B: P	roperty							12/15	
hink nfor Ansv	t it fits best. Be mation. If more wer every quest	e as complete and space is needed, ion.	accurate as possik attach a separate s	ole. If two sheet to th	married people his form. On the	in asset fits in more than one are filing together, both a le top of any additional pagern or Have an Interest In	are equally responsib	le for su	oplyi	ng correct	
		· .	<u> </u>								
. D	o you own or h	ave any legal or ed	quitable interest in	any resid	ence, building,	land, or similar property?					
	No. Go to Part	2.									
	Yes. Where is	the property?									
1.1				What	is the property	? Check all that apply					
		River Street Single-family home				nome	Do not deduct secured claims or exemptions. Po				
	Street address, it	f available, or other des	scription		Duplex or mul Condominium	ti-unit building or cooperative	the amount of any secured claims Creditors Who Have Claims Secu				
	Wilmingto	n IL	60481-0000		Manufactured Land	or mobile home	Current value o entire property			rent value of the tion you own?	
	City	State	ZIP Code		Investment pro	operty	\$68,0	77.00	_	\$68,077.00	
					Timeshare Other					wnership interest by the entireties, or	
				Who	has an interest Debtor 1 only	in the property? Check one	a life estate), if	known.			
	Will			_	Debtor 2 only						
	County				200101 1 4114 1	Debtor 2 only f the debtors and another	☐ Check if th		muni	ty property	
				Other		ou wish to add about this	(
				Valu	ie = \$68,077 eds New Ro						
					·	·					

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here.....=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$68,077.00

Debtor 1	Case 16-14185 Doc 1		Entered 04/26/16 age 11 of 50 Case no	15:21:57 umber (if known)	Desc Main
3 Cars va	ins, trucks, tractors, sport utility ve	hicles, motorcycles		_	
·	ino, iruono, iruotoro, oport utinity vo	motos, motor oyeroo			
□ No					
Yes					
3.1 Mak	01.0	Who has an interest in the pr	operty? Check one	the amount of any se	ed claims or exemptions. Put ecured claims on <i>Schedule D</i> :
Mod Year		Debtor 1 only			Claims Secured by Property.
	roximate mileage: 163,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Current value of the entire property?	e Current value of the portion you own?
	er information:	☐ At least one of the debtors a	and another		
Valu Sea	ue = \$513 per 04/24/16 KBB irch	Check if this is community (see instructions)	y property	\$513.0	\$513.00
	e dollar value of the portion you ow you have attached for Part 2. Write t				\$513.00
				L	
	scribe Your Personal and Household Ite				
-	vn or have any legal or equitable in	terest in any of the following	items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exampl</i> □ No	old goods and furnishings es: Major appliances, furniture, linens Describe	, china, kitchenware			
	Misc. Househol	d Goods and Furniture			\$750.00
□No	nics es: Televisions and radios; audio, vide including cell phones, cameras, m Describe		nt; computers, printers, sc	anners; music coll	lections; electronic devices
	Cell phone, tvs				\$200.00
Exampl	bles of value es: Antiques and figurines; paintings, other collections, memorabilia, co		pictures, or other art obje	cts; stamp, coin, o	or baseball card collections;
9. Equipment Example In No	ent for sports and hobbies es: Sports, photographic, exercise, an musical instruments Describe	nd other hobby equipment; bicy	cles, pool tables, golf club	ıs, skis; canoes an	nd kayaks; carpentry tools;
10. Firearn		tion, and related equipment			

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Debtor 1	Roberta Ann Lausch			Case number (if known)
☐ Yes.	Describe				
□ No	es uples: Everyday clothes, furs, Describe	leather coat	s, designer wear, shoes	, accessories	
	Porcon	al Usad Cla	othing of Debtor		\$400.00
-	Person	ai Useu Cit	or Debtor		
■ No		ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems	gold, silver
Exam ■ No	arm animals uples: Dogs, cats, birds, horse Describe	es			
■ No	ther personal and househo		u did not already list, iı	ncluding any health aids you did not list	
	the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$1,350.00
Part 4: De	escribe Your Financial Assets				
Do you o	wn or have any legal or eq	uitable inter	est in any of the follow	ring?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No				osit box, and on hand when you file your pet	ition
■ Yes.					
				Cash	\$100.00
			al accounts; certificates of counts with the same ins	of deposit; shares in credit unions, brokerage titution, list each.	e houses, and other similar
			Institution r	name:	
	17.1.		Chase Ch	necking Accout	\$126.00
	s, mutual funds, or publicly ples: Bond funds, investmen	nt accounts w	ith brokerage firms, mor	ney market accounts	
■ Yes	lr	nstitution or is	ssuer name:		
	<u>v</u>	Valmart Sto	ock		\$42.59
	ublicly traded stock and inventure	nterests in in	corporated and unince	orporated businesses, including an intere	est in an LLC, partnership, and
☐ Yes.	Give specific information a			0/ of ownership-	
Official For		e of entity:	Schedule A/B: F	% of ownership: Property	page 3

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Document Page 13 of 50 Case number (if known) Debtor 1 Roberta Ann Lausch 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

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Debtor 1	Roberta Ann Lausch			Case number (if known)	
	ts in insurance policies bles: Health, disability, or life	e insurance; h	ealth savings account (h	HSA); credit, homeowner's, or renter's insurar	nce
☐ Yes.	Name the insurance compa Com	any of each pop pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
If you a	terest in property that is dare the beneficiary of a living the has died.			ed surance policy, or are currently entitled to rece	eive property because
☐ Yes.	Give specific information				
<i>Examp</i> ■ No	against third parties, who bles: Accidents, employmen Describe each claim			it or made a demand for payment to sue	
24 Other	contingent and unliquidate	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
■ No	Describe each claim	eu ciaiiiis oi	every nature, moruumi	g counterclaims of the debtor and rights to	set on claims
35. Any fin	ancial assets you did not	aiready list			
☐ Yes.	Give specific information				
				ny entries for pages you have attached	\$268.59
Part 5: Des	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
37. Do vou c	own or have any legal or equi	table interest i	in any business-related pr	roperty?	
■ No. Go			,		
☐ Yes. G	So to line 38.				
	scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interest In.	
■ No.	Go to Part 7.	equitable in	terest in any farm- or c	commercial fishing-related property?	
☐ Yes.	. Go to line 47.				
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Did	Not List Above	
	have other property of an oles: Season tickets, country				
	Give specific information				

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known)

Document Debtor 1 Roberta Ann Lausch

Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$68,077.00
56.	Part 2: Total vehicles, line 5	\$513.00		
57.	Part 3: Total personal and household items, line 15	\$1,350.00		
58.	Part 4: Total financial assets, line 36	\$268.59		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$2,131.59	Copy personal property total	\$2,131.59
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$70,208.59

Official Form 106A/B Schedule A/B: Property page 6 Case 16-14185 Doc 1 Filed 04/26/16 Entered 04/26/16 15:21:57 Desc Main Page 16 of 50

		DOWNING	111 1 (400, 10 0) 00	
Fill in this inform	mation to identify your	case:		
Debtor 1	Roberta Ann Lau	sch		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited

Part 1:	Identify the	ne Property	You Clain	n as Exempt

o t	ne applicable statutory amount.				
Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yo	our spouse is filing with you.	
	You are claiming state and federal nonbank	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 L	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	,	Copy the value from Schedule A/B	Check only one box for each exemption.		
	438 River Street Wilmington, IL 60481	\$68,077.00		\$15,000.00	735 ILCS 5/12-901
	Will County Value = \$68,077 (Needs New Roof) Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	438 River Street Wilmington, IL 60481 Will County	\$68,077.00		\$3,658.00	735 ILCS 5/12-1001(b)
	Value = \$68,077 (Needs New Roof) Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2002 Saturn SL2 163,000 miles Value = \$513 per 04/24/16 KBB	\$513.00		\$513.00	735 ILCS 5/12-1001(c)
	Search Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Cell phone, tvs	\$200.00		\$200.00	735 ILCS 5/12-1001(b)

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$400.00

\$400.00

Personal Used Clothing of Debtor

Line from Schedule A/B: 11.1

735 ILCS 5/12-1001(a)

Entered 04/26/16 15:21:57 Document Page 17 of 50 Roberta Ann Lausch Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Walmart Stock** 735 ILCS 5/12-1001(b) \$42.00 \$42.59 Line from Schedule A/B: 18.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160 3752 es filed on or after the date of adjustment.)

o.	Are you oldining a nomestedd exemption of more than \$100,070.
	(Subject to adjustment on 4/01/19 and every 3 years after that for case

Doc 1

Case 16-14185

- No
- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 04/26/16

- Yes

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	(Case 16-14185	Doc 1	Filed 04/26/16 Document	Entere Page 18	ed 04/26/16 15:2 8 of 50	1:57 Desc N	/lain
Fill i	n this inf	ormation to identify you	ur case:					
Debt	tor 1	Roberta Ann La	niech					
DCDI	101 1	First Name		dle Name	Last Name			
Debt (Spou	tor 2 se if, filing)	First Name	Mid	dle Name	Last Name			
Linita	ad States	Bankruptcy Court for the	. NORTH	ERN DISTRICT OF ILL	INOIS			
Omic	ou Olulos	Barmaptoy Court for the		21117 21 11 12 12 12 12 12 12 12 12 12 12 12				
	e number							
(if kno	own)						_	t if this is an
							amen	ded filing
Offi	cial Fo	orm 106D						
		e D: Creditors	: Who F	lave Claims	Sacura	d hy Property		12/15
<u> </u>	ledui	e D. Creditors	S VVIIO I	lave Claims	<u>Jecui e</u>	a by Property		12/13
s nee		and accurate as possible. the Additional Page, fill it						
. Do	any credit	ors have claims secured b	y your proper	ty?				
	□ No. Ch	eck this box and submit t	this form to th	ne court with your other	schedules. Y	ou have nothing else to	report on this form.	
	Yes. Fi	II in all of the information	below.					
Part	1 lis	t All Secured Claims						
		red claims. If a creditor has	more than one	a accurad alaim, list the area	ditar apparatal	, Column A	Column B	Column C
for ea	ach claim.	If more than one creditor has le, list the claims in alphabet	s a particular c	laim, list the other creditors	s in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1	Chase		Describe th	e property that secures t	he claim:	value of collateral. \$56,235.71	\$68,077.00	If any \$0.00
	Creditor's N	Name	438 Rive	r Street Wilmington	, IL		¥ ,	
				/ill County	´			
			Value = \$	•				
				lew Roof) ate you file, the claim is:	Chaal, all that			
	PO Box		apply.	ate you file, the claim is:	Check all that			
	Phoeni	x, AZ 85062	☐ Continge	ent				
	Number, St	treet, City, State & Zip Code	☐ Unliquid	ated				
			Disputed					
		e debt? Check one.		ien. Check all that apply.				
	ebtor 1 onl		☐ An agree car loar	ement you made (such as r	mortgage or se	cured		
	ebtor 2 onl	у		1)				
		d Debtor 2 only		lien (such as tax lien, med	chanic's lien)			
_		of the debtors and another		nt lien from a lawsuit				
	heck if thi community	s claim relates to a / debt	☐ Other (in	cluding a right to offset)				
Date	debt was	incurred	Last	4 digits of account number	per <u>1608</u>			

Add the dollar value of your entries in Column A on this page. Write that number here: \$56,235.71

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$56,235.71

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	0000 10 1-100 1	Document	Page 19 of 50	Dese Main
Fill in this i	information to identify your			
Debtor 1	Roberta Ann Laus	sch		
DODIO! 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS	
Case numb	er			
(if known)				☐ Check if this is an
				amended filing
Official F	Form 106E/E			
	Form 106E/F		Olaim a	40/45
		ho Have Unsecured	ClaimS / claims and Part 2 for creditors with NONPRIOR	12/15
Schedule G: Schedule D: left. Attach th	Executory Contracts and Unexp Creditors Who Have Claims Sec	ired Leases (Official Form 106G). Do ured by Property. If more space is n	st executory contracts on Schedule A/B: Property on ot include any creditors with partially secured eeded, copy the Part you need, fill it out, number ort in a Part, do not file that Part. On the top of an	claims that are listed in the entries in the boxes on the
Part 1:	ist All of Your PRIORITY Un	secured Claims		
1. Do any o	creditors have priority unsecure	d claims against you?		
No. G	Go to Part 2.			
Yes.				
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any o	creditors have nonpriority unsec	cured claims against you?		
☐ No. Y	ou have nothing to report in this p	art. Submit this form to the court with y	our other schedules.	
Yes.				
unsecure	ed claim, list the creditor separately	y for each claim. For each claim listed,	e creditor who holds each claim. If a creditor has n identify what type of claim it is. Do not list claims alrave more than three nonpriority unsecured claims fill	eady included in Part 1. If more
				Total claim
4.1 Ad	vanced Urology Associa	tes Last 4 digits of acco	ount number	\$419.54
	priority Creditor's Name			
_	11 Riverboat Center Drive	When was the debt i	ncurred?	
	liet, IL 60431 hber Street City State Zlp Code	As of the date you fi	ile, the claim is: Check all that apply	
	o incurred the debt? Check one.	As of the date you h	ic, the dam is. Oncok an that apply	
_	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
_	At least one of the debtors and and	T (NONDRIGHT	TY unsecured claim:	
	Check if this claim is for a com	_		
deb	t	☐ Obligations arising	g out of a separation agreement or divorce that you	did not
	ne claim subject to offset?	report as priority claim		
= 1	No	☐ Debts to pension of	or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	Medical	

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Document Page 20 of 50 Debtor 1 Roberta Ann Lausch Case number (if know) 4.2 American Anesthesiology Assoc. Last 4 digits of account number 5121 \$120.00 Nonpriority Creditor's Name PO Box 936 When was the debt incurred? Bedford Park, IL 60499 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medial 4.3 Capital One Last 4 digits of account number 5178 \$2,295.31 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Π Yes **Credit Card** Other, Specify 4.4 **Capital One** Last 4 digits of account number \$758.67 2457 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another

☐ Yes

☐ Check if this claim is for a community

Is the claim subject to offset?

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

■ No

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Document Page 21 of 50 Debtor 1 Roberta Ann Lausch Case number (if know) 4.5 Capital One Last 4 digits of account number 5155 \$1.071.27 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.6 Capital One Bank Last 4 digits of account number 5201 \$1,318.33 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Π Yes **Credit Card** Other, Specify 4.7 Capital One NA Last 4 digits of account number 4688 \$624.09 Nonpriority Creditor's Name PO Box 71087 When was the debt incurred? Charlotte, NC 28272 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Credit Card

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Roberta Ann Lausch Case number (if know) 4.8 Cardiology Interpreation Last 4 digits of account number 3229 \$25.00 Nonpriority Creditor's Name 2801 Black Road When was the debt incurred? Suite! Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.9 **Creditors Collections Bureau** Last 4 digits of account number 2900 \$1,564.94 Nonpriority Creditor's Name PO Box 63 When was the debt incurred? Kankakee, IL 60901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 \$180.00 **Internal Medicine & Family Practice** unknown Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? 1719 Glenwood Ave Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

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Roberta Ann Lausch	Case number (if know)	
Juniper Card Services	Last 4 digits of account number 5140	\$917
Nonpriority Creditor's Name PO Box 60517	When was the debt incurred?	
City of Industry, CA 91716 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Kohls	Last 4 digits of account number 0550	\$665
Nonpriority Creditor's Name		·
PO Box 2983	When was the debt incurred?	
Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oncok an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Meridian Medical Associatioes	Last 4 digits of account number 1427	\$2,752
Nonpriority Creditor's Name		
2100 Glenwood Avenue Joliet, IL 60435	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

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When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated	\$2,20
As of the date you file, the claim is: Check all that apply Contingent Unliquidated	
☐ Contingent ☐ Unliquidated	
□ Unliquidated	
□ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Credit Card	
Last 4 digits of account number 6044	\$1,70
When was the debt incurred?	
As of the date you file the claim is: Check all that apply	
As of the date you me, the damins. Oneon all that apply	
☐ Contingent	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
lacksquare Obligations arising out of a separation agreement or divorce that you did not	
<u> </u>	
■ Other. Specify Credit Card	
Last 4 digits of account number unknown	\$2,8 1
when was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
Obligations arising out of a separation agreement or divorce that you did not	
	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card Last 4 digits of account number Unknown When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans

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Presence Saint Joseph Medical Cente	Last 4 digits of account number 2007	\$1,564
Nonpriority Creditor's Name 32814 Collection Center Drive Chicago, IL 60693	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Presence St. Joseph Medical Center	Last 4 digits of account number 2015	\$1,248
Nonpriority Creditor's Name 1643 Lewis Avenue, Suite 203 Billings, MT 59102	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Walmart / Synchrony Bank	Last 4 digits of account number 6032	\$2,829
Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 530927 Atlanta, GA 30353	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

☐ Student loans $\hfill\Box$ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

■ Other. Specify Credit Card

Name and Address

☐ Yes

On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Roberta Ann Lausch		Case number (if know)
Creditors Collections Bureau PO Box 63 Kankakee, IL 60901	Line 4.18 of (Check one): Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Creditors Discount & Audit	On which entry in Part 1 or Part 1 Line 4.1 of (Check one):	2 did you list the original creditor?
415 East Main Street	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
PO Box 213		Part 2: Creditors with Nonpriority Unsecured Claims
Streator, IL 61364		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part :	2 did you list the original creditor?
NCC Nationwide	Line 4.13 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive		■ Part 2: Creditors with Nonpriority Unsecured Claims
Suite 270 Oak Brook, IL 60523		
Oak Blook, IL 00323	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			-	Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
			-	Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	25,075.77
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	25,075.77
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6a. S 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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			111 1 11111. 21 01 30	
Fill in this info	rmation to identify your	case:		
Debtor 1	Roberta Ann Lau	sch		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

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		Docume	ent Page 28 d	of 50	
Fill in thi	s information to identify your	case:			
Debtor 1	Roberta Ann Lau	Middle Name	Last Name		
Debtor 2	1 list Name	Wildele Name	Lastivame		
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Casa pur	mbor				
Case nur	IIDEI			☐ Chec	k if this is an
					ided filing
					acag
Officia	al Form 106H				
		ala4 a ma			
Sche	dule H: Your Cod	eptors			12/15
your nam	e and case number (if known you have any codebtors? (If). Answer every question		o this page. On the top of any Addition as a codebtor.	. • • • • • • • • • • • • • • • • • • •
_					
■ No					
□ Ye	es				
	ithin the last 8 years, have yo na, California, Idaho, Louisiana			y? (Community property states and territington, and Wisconsin.)	ories include
_					
	o. Go to line 3.				
⊔ Y€	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
				if your spouse is filing with you. List t	
				sure you have listed the creditor on So	
	n 106D), Schedule E/F (Officia Column 2.	l Form 106E/F), or Sched	ule G (Official Form 10	6G). Use Schedule D, Schedule E/F, or	r Schedule G to fill
out	Joidini 2.				
	Column 1: Your codebtor			Column 2: The creditor to whom y	ou owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	
2.4				O objected D. Pres	
3.1	Name			Schedule D, line	
	· · · · · · · · · · · · · · · · · · ·			☐ Schedule E/F, line	_
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name	<u> </u>		☐ Schedule E/F, line	_
				☐ Schedule G, line	=
	Number Street			_	
	City	State	ZIP Code		

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						_				
	in this information to identify your obtor 1 Roberta An									
	btor 2 puse, if filing)									
	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number 		-			□ A		ed filing ent showin	g postpetition	
0	fficial Form 106I					M	IM / DD/ Y	/YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment Fill in your employment	ır spouse is not filing w	ith you, do not inclu	de infor	mati	on about	your spo imber (if	ouse. If mo known). A	ore space is inswer every	needed,
	information.						Debtor 2 or non-filing spouse ☐ Employed			
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Not employed			
	employers.	Occupation	Cashier							
	Include part-time, seasonal, or self-employed work.	Employer's name	Walmart							
	Occupation may include student or homemaker, if it applies.	Employer's address	333 Route 6 Morris, IL							
		How long employed t	here? 12 year	s			_			
Pai	rt 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all	empl	oyers for	that perso	on on the li	nes below. If	you need
						For Deb	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2	480.60	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	2,48	30.60	\$	N/A	

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Debt	or 1	Roberta Ann Lausch	-	C	ase nur	nber (<i>if kr</i>	nown)				
					For De	btor 1		For	Debtor	2 or	
	•	welling Albana			Φ.	- 101			n-filing s	•	
	Cop	by line 4 here	4.		\$	2,480).60	\$_		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	470).71	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	21	.67	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.		\$	(0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$_		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$		5.18	\$_ \$		N/A	_
	5g.	Union dues	5g		\$		0.00	-\$-		N/A N/A	_
	5h.	Other deductions. Specify:	5h		\$			+ \$-		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	:	\$		3.56	\$		N/A	=
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ \$	1,872		\$		N/A	_
8.			•		* —	1,072	0-	_		14/7	_
О.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm									
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$		0.00	\$_		N/A	_
	8b.	Interest and dividends	8b		\$	(0.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	(0.00	\$		N/A	
	8d.	Unemployment compensation	8d		\$		0.00	\$_		N/A	
	8e.	Social Security	8e		\$	(0.00	\$		N/A	- _
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	(0.00	\$		N/A	
	8g.	Pension or retirement income	8g		\$		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	.+	\$			+ \$ _		N/A	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	(0.00	\$_		N/A	A
10	Cald	culate monthly income. Add line 7 + line 0	10.	\$	4 0	72.04	+ \$		NI/A	= \$	1 972 04
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Φ_	1,0	7 2.04	+ \$		N/A	= \$ _	1,872.04
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your prince friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depe					•		e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	1,872.04
13.	Doy	you expect an increase or decrease within the year after you file this form	?							Combi monthl	ned ly income
		No									
		Yes Explain:									

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ΕiII-	in this informe	ation to identify yo	our caso:							
						O.				
Deb	otor 1	Roberta Ann	Lausch			Cr	eck if this	ıs: nded filing		
Deb	otor 2							Ū	wing postpetition chapte	r
(Spo	ouse, if filing)					_	13 expe	nses as of	the following date:	
Unit	ed States Bankı	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DI	O / YYYY		
	e number nown)									
Of	fficial Fo	orm 106J								
So	chedule	J: Your	Exper	ises					12	2/15
Be info	as complete ormation. If m	and accurate as	possible.	. If two married people ar ch another sheet to this						
		ribe Your House	hold							
1.	Is this a joir									
	■ No. Go to		_							
			ın a separ	ate household?						
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebtor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dep age	endent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
									□ Yes □ No	
									☐ Yes	
3.		penses include		No					_ 100	
		f people other to d your depende	han $_{m \Box}$	Yes						
	yoursen an	a your depende	1113 :							
Est exp	imate your ex	nate Your Ongoi expenses as of your added after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a J, check	suppleme the box a	nt in a Cha t the top o	apter 13 case to report of the form and fill in th	e
Incl	lude expense	es paid for with	non-cash	government assistance it	f vou know					
the		h assistance an		cluded it on Schedule I: Y			_	Your exp	enses	
4.		or home owners nd any rent for th		ses for your residence. In	nclude first mortgage	4.	\$		517.45	
	If not include	ded in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	•	erty, homeowner's				4b.	: —		0.00	
				ipkeep expenses		4c.	· · · —		0.00	
5.		owner's associat		dominium dues our residence , such as hoi	me equity loans	4d. 5.			0.00	
◡.	, .aaitiOilai i	raago payiii	J. yc	i ooiaoiioo, suuli as IIUl	no oquity localio	J.	Ψ		0.00	

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ebtor 1 _	Roberta Ann Lausch	Case number (if known)	
. Utilitie	ne.		
	Electricity, heat, natural gas	6a. \$	120.00
	Water, sewer, garbage collection	6b. \$	84.00
	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	0.00
	Other. Specify:	6d. \$	0.00
	and housekeeping supplies	7. \$	
		· ———	650.00
	care and children's education costs	8. \$	0.00
	ng, laundry, and dry cleaning	9. \$	120.00
	nal care products and services	10. \$	60.00
	al and dental expenses	11. \$	60.00
	portation. Include gas, maintenance, bus or train fare.	12. \$	300.00
	ainment, clubs, recreation, newspapers, magazines, and books	13. \$	60.00
	able contributions and religious donations	14. \$	0.00
i. Insura	<u> </u>	14. ψ	0.00
	include insurance deducted from your pay or included in lines 4 or 20		
	Life insurance	15a. \$	0.00
	Health insurance	15b. \$	0.00
	Vehicle insurance	15c. \$	33.70
		15d. \$	
	Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or		0.00
Specify	y:	16. \$	0.00
	ment or lease payments:	170 ¢	0.00
	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	payments of alimony, maintenance, and support that you did not ted from your pay on line 5, Schedule I, Your Income (Official For		0.00
	payments you make to support others who do not live with you.	\$	0.00
Specify		19.	
	real property expenses not included in lines 4 or 5 of this form of		
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	Homeowner's association or condominium dues	20e. \$	
		·	0.00
. Other:	Specify:	21+\$	0.00
2. Calcul	late your monthly expenses		
22a. A	dd lines 4 through 21.	\$	2,005.15
22b. C	copy line 22 (monthly expenses for Debtor 2), if any, from Official Form		,
	dd line 22a and 22b. The result is your monthly expenses.	\$	2 005 45
220. AC	ad inte 22a and 22b. The result is your monthly expenses.	Ψ	2,005.15
	late your monthly net income.		
23a. (Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,872.04
	Copy your monthly expenses from line 22c above.	23b\$	2,005.15
	177	- · · · · - · · · · · · · · · · · · · ·	2,000.10
	Subtract your monthly expenses from your monthly income.	23c. \$	-133.11
	The result is your monthly net income.	230. μ	100.11
4 Do you	u expect an increase or decrease in your expenses within the yea	r after you file this form?	
	imple, do you expect to finish paying for your car loan within the year or do you		se or decrease because c
	ation to the terms of your mortgage?	, y	
■ No.			
- 110.	Explain here:		

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Fill in this	s information to identify your	case:			
Debtor 1					
Debioi	Roberta Ann Lau First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	lling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106Dec				
Decla	aration About a	an Individua	Debtor's Sc	hedules	12/15
lf two mar	rried people are filing togethe	r, both are equally response	onsible for supplying cor	rect information.	
You must	file this form whenever you fi	ile bankruptcy schedule	s or amended schedules.	. Making a false statem	ent, concealing property, or
obtaining	money or property by fraud in	n connection with a ban			
years, or I	both. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
	Sign Below				
Did	you pay or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
_	No				
П	Yes. Name of person			Attach Bankru	ptcy Petition Preparer's Notice,
					nd Signature (Official Form 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the sun	nmary and schedules file	d with this declaration	and
v /	/o/ Deborte Ann Leuceb		v		
	s/ Roberta Ann Lausch Roberta Ann Lausch		XSignature of	Debtor 2	
	Signature of Debtor 1		Oignatare of		
-	Data - A!! 00, 0040		Dete		
L	Date April 26, 2016		Date		

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Fill	in this inform	nation to identify you	r case:			
Deb	tor 1	Roberta Ann La	usch			
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Cas	e number					
(if kno	_				_	Check if this is an mended filing
~"	–	407				
	icial For		Affaira far Indivis	luala Filina fan D		
			Affairs for Indivic			4/10
					equally responsible for sup additional pages, write you	
num	ber (if known). Answer every que	stion.			
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married					
	■ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than v	where you live now?		
	■ N.		•	•		
	■ No □ Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
		or Address:	Dates Debtor 1	Debtor 2 Prior Ad		Dates Debtor 2
	Debitor 1 Fil	oi Address.	lived there	Debiol 2 Filor Ad	ui ess.	lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	ill businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$6,564.01	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 35 of 50 Case number (if known) Debtor 1 Roberta Ann Lausch

				Debtor 1			Debtor 2		
For last calendar year:				Sources of income Check all that apply.	Gross income (before deductions and exclusions) \$23,940.00		Sources of inc Check all that a		Gross income (before deductions and exclusions)
			, 2015)	■ Wages, commissions, bonuses, tips			☐ Wages, commissions, bonuses, tips		
				☐ Operating a business			☐ Operating a	business	
				■ Wages, commissions, bonuses, tips	\$24,077.00		☐ Wages, commissions, bonuses, tips		
				☐ Operating a business			☐ Operating a	business	
	Include income regardless of whether that income is taxable. Examples of <i>other income</i> are alimony; child support; Social Security, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gamble winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.								
				Debtor 1			Debtor 2		
				Sources of income Describe below.	Gross income f each source (before deductio exclusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	Certain Paym	nents You	Made Before You Filed for	Bankruptcy				
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
	Creditor's Name and Address			Dates of payme	ent Total an	nount paid	Amount you still owe	Was this p	payment for
	Chase			Feb, March, A Mortgage Payment	spril \$1,55	52.35	\$0.00	■ Mortgag □ Car □ Credit 0 □ Loan Re □ Supplie	Card

☐ Other__

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Document Page 36 of 50 Case number (if known) Debtor 1 Roberta Ann Lausch Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

per person Person to Whom You Gave the Gift and Address:

Gifts with a total value of more than \$600

Describe the gifts

Dates you gave the gifts

Value

Official Form 107

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14.	Within 2 years before you filed for bankrup	otcy, c	lid you give any gifts or contributions	s with a total	value of more than	\$600 to any charity?	
	■ No						
	Yes. Fill in the details for each gift or cor	tributi	on.				
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al	Describe what you contributed		Dates you contributed	Value	
Par	t 6: List Certain Losses						
	Within 1 year before you filed for bankrupt or gambling?	cy or	since you filed for bankruptcy, did yo	ou lose anytl	ning because of thef	t, fire, other disaster	
	■ No	No.					
	Yes. Fill in the details.						
	Describe the property you lost and D	oscri	be any insurance coverage for the lo	ee	Date of your	Value of property	
	how the loss occurred		•		loss	lost	
			the amount that insurance has paid. Lice claims on line 33 of Schedule A/B: F				
Par	17: List Certain Payments or Transfers						
	Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment					Amount of	
	Address Email or website address Person Who Made the Payment, if Not You	u	Description and value of any property transferred		Date payment or transfer was made	payment	
	Banyon & Scheinbaum, LLC 3077 West Jefferson Street Suite 107 Joliet, IL 60435		\$450 (Attorney Fee) = \$335 Filir	ng Fee		\$785.00	
	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	ors o	r to make payments to your creditors		r transfer any prope	rty to anyone who	
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid		Description and value of any prope	ertv	Date payment	Amount of	
	Address		transferred	.i.ty	or transfer was	payment	
	Within 2 years before you filed for bankrup transferred in the ordinary course of your linclude both outright transfers and transfers in include gifts and transfers that you have alreated No Yes. Fill in the details.	busin nade a	ess or financial affairs? as security (such as the granting of a se				
	Person Who Received Transfer		Description and value of	Describe a	iny property or	Date transfer was	
	Address Person's relationship to you		property transferred		received or debts	made	

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Debtor 1 Roberta Ann Lausch

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)						
	■ No						
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made	
Par	8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and St	torage Unit	ts		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No	r other financial accou	nts; certificates	s of deposi			
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution	Who else had acc		Describe the contents		Do you still have it?	
	Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) State and ZIP Code)					nave it:	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	9: Identify Property You Hold or Control f	ĺ					
	,						
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
Par	10: Give Details About Environmental Info	rmation					
For	he purpose of Part 10, the following definitio	ons apply:					
	-						
	Environmental law means any federal, state, toxic substances, wastes, or material into the	•		• .	-		

- regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Roberta Ann Lausch

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No						
	Yes. Fill in the details.	0	Endown while Ware	Data at matter			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.							
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	onmental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	_						
	No. None of the above applies. Go to Part						
	Yes. Check all that apply above and fill in the						
	Address	scribe the nature of the business	Employer Identification number Do not include Social Security n	umber or ITIN.			
	(Number, Street, City, State and ZIP Code)	Dates business existed					
28.	Within 2 years before you filed for bankruptcy, o	did you give a financial statement to	o anyone about your business? Inclu	de all financial			
	■ No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	te Issued					
	,						

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Case number (if known) Debtor 1 Roberta Ann Lausch Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Roberta Ann Lausch Roberta Ann Lausch Signature of Debtor 2 Signature of Debtor 1 Date April 26, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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Fill in this inform	nation to identify your	case:			
Debtor 1	Roberta Ann Laus	sch			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	rm 108				
		n for Indiv	iduals Filing	Under Chapte	er 7 12/15
				, onder onder	
•	vidual filing under chap		out this form if:		
_	claims secured by yo				
You must file this	ver is earlier, unless th	ithin 30 days after	you file your bankrupto		et for the meeting of creditors, e creditors and lessors you list
	ople are filing together d date the form.	in a joint case, bo	th are equally responsi	ble for supplying correct in	nformation. Both debtors must
	nd accurate as possib our name and case nun		needed, attach a sepa	rate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims			
1. For any credito	ors that you listed in Pa	art 1 of Schedule D	: Creditors Who Have 0	Claims Secured by Property	/ (Official Form 106D), fill in the
information be	low. ditor and the property tl	nat is collateral	What do you intend t	to do with the property that	Did you claim the property
, , , , , , , , , , , , , , , , , , , ,			secures a debt?	,	as exempt on Schedule C?
Creditor's Cl	hase		☐ Surrender the prop	erty.	□ No
name:			Retain the property	-	-
Description of	438 River Street W	38 River Street Wilmington, IL	☐ Retain the property Reaffirmation Agre		■ Yes
property	60481 Will County	•	Retain the property		
securing debt:	Value = \$68,077 (Needs New Roof)		Honor Mortgage	Discharge Note	
Part 2: List Yo	our Unexpired Persona	I Proporty Lossos			
			in Schedule G: Executo	ory Contracts and Unexpire	ed Leases (Official Form 106G), fill
				es that are still in effect; th sume it. 11 U.S.C. § 365(p)(e lease period has not yet ended. 2).
Describe your un	nexpired personal prop	perty leases			Will the lease be assumed?
Lessor's name:					□ No
Description of lea Property:	sed				☐ Yes
Lessor's name:					_
Description of lea	sed				□ No
Property:					☐ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	F	Roberta Ann Lausch	Case number (if known)
Lessor's Descripti			□ No
Property			☐ Yes
Lessor's Descripti			□ No
Property:		on reased	☐ Yes
Lessor's Descripti		···	□ No
Property:		oi ieaseu	☐ Yes
Lessor's Descripti			□ No
Property:		or reased	☐ Yes
Lessor's			□ No
Descripti Property:		or reased	☐ Yes
Part 3:	Si	gn Below	
		ty of perjury, I declare that I have indicated my intention t is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
χ /s/	Rol	berta Ann Lausch	X
Rol	ber	ta Ann Lausch	Signature of Debtor 2
Sigr	natu	ure of Debtor 1	
Date	е	April 26, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-14185 Doc 1 Filed 04/26/16 Entered 04/26/16 15:21:57 Desc Main Document Page 47 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Roberta Ann Lausch		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE				
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy,	or agreed to be pai	d to me, for service	d that ces rendered or to
				450.00	
	Prior to the filing of this statement I have received.		\$	450.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are men	mbers and associa	ites of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the nar				my law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	s of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, stat c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho 	ement of affairs and plan which ors and confirmation hearing, an reduce to market value; ex- ons as needed; preparation	n may be required; and any adjourned he emption planning	earings thereof;	and filing of
6.	By agreement with the debtor(s), the above-disclosed fer Representation of the debtors in any ad		g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an anarranty proceeding.	y agreement or arrangement for	payment to me for	representation of	the debtor(s) in
Δ	pril 26, 2016	/s/ Christina Ban	yon		
	Date	Christina Banyor	1		
		Signature of Attorne Banyon & Scheir 3077 West Jeffer	baum, LLC		
		Suite 107	.		

Joliet, IL 60435

Name of law firm

cbanyon.law@gmail.com

United States Bankruptcy CourtNorthern District of Illinois

In re	Roberta Ann Lausch		Case No.	
mie	Roberta Allii Lauscii	Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	20
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	ors is true and correct	to the best of my
Date:	April 26, 2016	/s/ Roberta Ann Lausch Roberta Ann Lausch Signature of Debtor		

Advanced Urology Associates 1541 Riverboat Center Drive Joliet, IL 60431

American Anesthesiology Assoc. PO Box 936 Bedford Park, IL 60499

Capital One PO Box 6492 Carol Stream, IL 60197

Capital One Bank PO Box 6492 Carol Stream, IL 60197

Capital One NA PO Box 71087 Charlotte, NC 28272

Cardiology Interpreation 2801 Black Road Suite!
Joliet, IL 60435

Chase PO Box 78420 Phoenix, AZ 85062

Creditors Collections Bureau PO Box 63 Kankakee, IL 60901

Creditors Discount & Audit 415 East Main Street PO Box 213 Streator, IL 61364

Internal Medicine & Family Practice 1719 Glenwood Ave Joliet, IL 60435

Juniper Card Services PO Box 60517 City of Industry, CA 91716 Kohls PO Box 2983 Milwaukee, WI 53201

Meridian Medical Associatioes 2100 Glenwood Avenue Joliet, IL 60435

Merrick Bank PO Box 660702 Dallas, TX 75266

NCC Nationwide 815 Commerce Drive Suite 270 Oak Brook, IL 60523

Paypal Credit SVCS / SYNCB PO Box 960080 Orlando, FL 32896

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Presence Saint Joseph Medical Cente 32814 Collection Center Drive Chicago, IL 60693

Presence St. Joseph Medical Center 1643 Lewis Avenue, Suite 203 Billings, MT 59102

Walmart / Synchrony Bank PO Box 530927 Atlanta, GA 30353